Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

The Department of Economic Security, Arizona Early Intervention Program (DES/AzEIP), acting as the Lead Agency under Part C of IDEA, gathered and synthesized information from multiple sources, including 618 data, agency data systems, monitoring data, and information from the complaint and dispute resolution process. As was the process in developing the Annual Performance Report, DES/AzEIP personnel reviewed and interpreted the available data to determine the status of the State's performance and compliance with specified indicators and the possible reasons for progress or slippage. Based on the data and its description, DES/AzEIP proposed measurable targets, where State determination was appropriate (i.e., performance indicators and not compliance indicators). In addition, DES/AzEIP proposed improvement activities, timelines, and resources that aligned with activities of the Arizona Compliance Agreement and extended into the period beyond the scope of the Compliance Agreement.

DES/AzEIP convened three stakeholder meetings in 2005 and presented data and information based on the preliminary drafts described above to each stakeholder group. DES/AzEIP's presentation focused on the statewide data, and, when available, local data, and the meaning of the data. For example, DES/AzEIP presented statewide and local data on Indicator 7 regarding the percent of eligible children with IFSPs for whom evaluation and assessment and an initial Individualized Family Service Plan (IFSP) meeting were conducted within Part C's 45-day timeline. DES/AzEIP presented data for both (a) evaluation and assessment and (b) the initial IFSP, and described how the data could be interpreted. After a brief summary of the State's current Compliance Agreement initiatives that impact compliance with the 45-day timeline, DES/AzEIP engaged stakeholders in a discussion of (a) the data, (b) the interpretation of the data, and (c) the improvement activities, timelines and resources, excluding Compliance Agreement activities, that would improve the State's compliance with each indicator. Input from the three stakeholder groups was documented during the meetings and incorporated into the State Performance Plan.

The composition of each stakeholder group determined the focus of each meeting. The first stakeholder group was composed primarily of (1) DES/AzEIP's contractors, who are responsible for the Initial Planning Process (IPP) and Program Coordination, (2) agency representatives from (a) the DES, Division of Developmental Disabilities (DDD), (b) Arizona State Schools for the Deaf and the Blind (ASDB), and (c) the Arizona Department of Health Services, Office for Children with Special Health Care Needs (ADHS/OCSHCN). Because this group is involved with public awareness, child find, the initial evaluation and assessment, and, if eligible, the development of the initial IFSP, DES/AzEIP staff engaged this group in a discussion of Indicators 3 (child outcomes), 5 (percent of children, birth to one, with an IFSP), 6 (percent of children, birth to three, with an IFSP), and Indicator 7 (percent of infants and toddlers with an IFSP for whom evaluation and assessment and an initial IFSP meeting was conducted within the 45-day timeline).

The second and third stakeholder groups were composed of (1) members of the Interagency Coordinating Council (ICC); (2) DES/AzEIP's contracted Program Coordinators; (3) agency representatives from DDD, ASDB, ADHS/OCSHCN, and Arizona Department of Education (ADE); and (4) the public. Invitations to the second and third stakeholder groups were broadly distributed electronically to listservs for the ICC, its committees, agency partners, contractors and others who have requested notices regarding AzEIP and the ICC. The second stakeholder group focused on Indicators 1 (timely services), 7 (percent of infants and toddlers with an IFSP for whom evaluation and assessment and an initial IFSP meeting was conducted within the 45-day timeline,) and 8 (transition). The third stakeholder group focused on Indicators 4 (family outcomes), and 9 (general supervision), which touched on compliance and performance for all of the other indicator areas.

DES/AzEIP also facilitated an early childhood outcomes task force in 2005 consisting of representatives from the IPP contractors, AzEIP Standards of Practice trainers, a higher education institute, ASDB, and DES/AzEIP, to make recommendations for Child Outcomes, Indicator #3. The

task force's preliminary recommendations were shared with the first stakeholder group and input incorporated into the plan.

During development of the FFY2005 APR in 2006 DES/AzEIP determined the necessity of revisions to the SPP, including timelines and activities in order to address slippage that had occurred on several indicators, and to ensure that future targets would be met. The actual target data was presented at a stakeholders meeting in January 2007. The stakeholder group was involved in discussions of new and revised improvement strategies.

DES/AzEIP will disseminate the SPP to the public via broad electronic distribution to its listservs for the ICC, its committees, agency partners, DES/AzEIP contractors, and others who have requested notices regarding AzEIP and the ICC. DES/AzEIP also will post the SPP to its website.

Monitoring Priority: Early Intervention Services in Natural Environments

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Indicator – 1. Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.

> **Measurement:** Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.
>
> Account for untimely receipt of services.

Overview of Issue/Description of System or Process:

The family's Individualized Family Service Plan (IFSP) team (of which the family is a member) decides which supports and services are needed to make progress toward the desired outcomes. These supports and services are listed on the IFSP, along with the projected "start date" for each. The IFSP team designates the start date for each service to reflect the priorities of the family and their need for support in attaining the identified IFSP outcomes, as well as the roles of each team member in supporting each other and the family. As a result, start dates may be staggered over the period for which the IFSP is established.   The service coordinator is responsible for accessing the early intervention services identified on the IFSP. AzEIP service coordinators obtain services through their agencies' network of providers, which can include employees or contractors and through a family's health plan.

During the 2004-2005 reporting period and monitoring cycle, AzEIP's Child File Audit Guidance documents defined "timely" as beginning "very close to the start date on the IFSP". AzEIP rated a program noncompliant if <u>any</u> of the early intervention services listed on the IFSP were not provided in a timely manner. Baseline data collected during the period reflected that standard and measure.

The monitoring process used by AzEIP for the 2005-2006 reporting year reflected implementation of a consistent definition of "timely". Services were considered timely if they began on or before the service start date on the IFSP. Arizona continued to use the standard that if any service on a child's IFSP was not started in a timely manner, the file was counted noncompliant on this indicator. Reasons for service delay were not documented during this monitoring cycle because OSEP guidance on collecting reason data was issued after completion of the monitoring cycle.

Site visits conducted during the 2005-2006 reporting period and subsequent years will be based on a revised child file audit tool that a) reflects the approved standard for determining if a service is timely, b) will collect timeliness data by service, and c) will account for reasons for delay in service delivery. Individual services will be considered timely if they begin within 45 days of parent consent of the Individualized Family Service Plan, or by the planned start date for the service if that planned date is

greater than 45 days from IFSP consent. AzEIP will continue to consider a child's file out of compliance on this indicator if any early intervention service is not provided in accordance with the timely standard.

Programs will also report timely service data in their program self-assessment process, but that data will not be used to report compliance for the purpose of this indicator.

Baseline Data for FFY 2004 (2004-2005):

2004-2005 Baseline data related to services are provided in accordance with start date on IFSP:

Year	2004-2005
Data Source	**Cycle 2 Site Visits**
Number of IFSPs reviewed	168
# who receive services in a timely manner	81
Percent	48%

Discussion of Baseline Data:

Data from Cycle 2 onsite monitoring visits is the source of the baseline data for this indicator. A complete description of AzEIP's Continuous Quality Improvement and Monitoring System (CQIMS) is found in the overview of Indicator 9. During the first year of on-site monitoring visits, the monitors found a large number of IFSPs in which the planned start date for all services was the same date as the IFSP signature date. To take this error into consideration, the monitors made a determination of "timely" if there was documentation in the child's file that all services were provided within 30 days of the "start date" listed on the IFSP. Subsequently, guidance and technical assistance were provided to service coordinators to clarify the difference between IFSP signature date and service start dates. Beginning with the 2005-2006 monitoring year services are considered timely only if they meet the approved definition of timely.

The original on-site process did not differentiate the timeliness of each service listed for a child, but rather evaluated if all IFSP services were provided in a timely manner. If any service listed on the IFSP was not started in a timely manner, the entire item was considered noncompliant. In addition, AzEIP did not document mitigating factors, such as child illness or cancellations by family members.

Other contributing factors influencing the identified non-compliance during the baseline period include: (1) many service coordination agencies did not have a mechanism in place to track and document when a service actually began; (2) the onsite reviewers often found that the "start date" listed on the IFSP was the same date as the IFSP meeting, not the anticipated start date for the service; and (3) statewide capacity issues for ongoing therapy, as service coordinators struggle to locate providers for families.

FFY	Measurable and Rigorous Target
2005 **(2005-2006)**	**60%**
2006 **(2006-2007)**	**65%**

2007 **(2007-2008)**	**100%**
2008 **(2008-2009)**	**100%**
2009 **(2009-2010)**	**100%**
2010 **(2010-2011)**	**100%**

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Provide technical assistance to agencies on timely provision of services, including policy and procedures, through monitoring activities; Quarterly Regional meetings, and focused technical assistance.	October 2006 and ongoing	Continuous Quality Improvement (CQI) Coordinators, Comprehensive System of Personnel Development (CSPD) Coordinator, and Technical Assistance and Monitoring Specialists (TAMS)
Evaluate the scope of system capacity issues.		
Meet with Standards of Practice contractor [Arizona Staff Development and Training Project (ASDTP)] to review and, as needed, revise the AzEIP Program Registration/Personnel Registry to accurately capture personnel providing early intervention.	December 2005, 2006	CSPD Coordinator, ASDTP Staff, Executive Director
Evaluate the number of therapists involved in the provision of early intervention services.	December 2005	CSPD Coordinator,
Conduct an analysis of current market rates for therapies (national therapy rates, the AzEIP participating agencies' rates, AHCCCS, private insurance, and public schools).	January 2006	CSPD Coordinator, EP&P Consultants with DDD
Identify and implement personnel recruitment and retention strategies.		
Establish and maintain regional directories of providers that will be available to agencies and programs that are building or expanding the service-providing network.	June 2006, 2007, 2008	Local Program Coordinators, TA Specialist, CSPD Coordinator
Through newsletters and conference presentations, partner with State Professional Associations to reach greater numbers of qualified personnel who are interested in	March 2006 and annually	CSPD Coordinator, ASDTP Staff

providing early intervention services.		
Work with the Institutes of Higher Education (IHE) to encourage students to prepare for the field of early intervention, recruit new graduates and incorporate the AzEIP Standards of Practice requirements into pre-service curricula.	December 2005 and annually	CSPD Coordinator, ASDTP Staff
Implement a team-based service delivery model that ensures compliance with timely identification of infants and toddlers with disabilities and provision of services to infants and toddlers with disabilities and their families while maximizing personnel resources.		
Draft team-based service delivery model that ensures compliance and maximizes personnel resources.	December 2005	Executive Director, State Interagency Team, DES/AzEIP Staff
Facilitate broad public review and comment on the proposed service delivery model.	March 2006	Executive Director, State Interagency Team, DES/AzEIP Staff
Implement an interagency plan to support the proposed model of service delivery, including the establishment of new contracts and/or the revision of policies and procedures.	June 2008	Executive Director, State Interagency Team, DES/AzEIP Staff
Evaluate efficacy of team-based model.	December 2008 and ongoing through 2010	CQI Coordinators, CSPD Coordinator, Technical Assistance (TA) Specialist, Technical Assistance & Monitoring Specialists, State Interagency Team (SIT)
Implement procedures for AzEIP service providing agencies to monitor files to collect data on timely provision of services, with a drill-down for non-timely services, including reasons.	February 2007 and quarterly through February 2008; bi-annually thereafter	CQI Coordinators and TAMS
Provide additional technical assistance on policy and procedures, including timelines, for using all funding sources such as Medicaid funds.	July 2007	CQI Coordinators and TAMS
Explore and provide written clarification, as appropriate, for AzEIP participating agencies' guidance to assist families to access timely services.	December 2007 and annually	Executive Director, CQI Coordinators and CSPD Coordinator
Provide technical assistance on communication mechanisms for accessing available providers and documenting start dates.	September 2007	CQI Coordinators and TAMS
Conduct regional meetings to provide training and technical assistance on policies, procedures, and best practice to early intervention professionals.	October 2006 and ongoing	CQI Coordinators, TA Specialist, CSPD Coordinators, TAMS
Update IFSP form and related procedures, as needed, to align with SPP indicators and IDEA 2004 requirements.		
Revise IFSP to clarify "Start Date" as "Planned Start Date."	January 2006 – March 2006	CQI Coordinators, CSPD Coordinator, Technical Assistance & Monitoring Specialist

Disseminate revised IFSP form with guidance.	March 2006	CQI Coordinators, Technical Assistance & Monitoring Specialists, CSPD Coordinator
Incorporated by reference are the improvement activities from Indicator # 7 regarding technical assistance and training on the above items.		
Incorporated by reference are the improvement activities from Indicator # 9 regarding implementation of the CQIMS.		

<u>Indicator 2</u>

Overview of the State Performance Plan Development: Described in Indicator 1.

Monitoring Priority: Early Intervention Services in Natural Environments

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Indicator – 2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children.

> **Measurement:** Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Overview of Issue/Description of System or Process:

Historically, the legal requirement for natural environments and the reasoning behind the requirement was not well understood by the early intervention community. Technical assistance, training, policy clarification, and contract changes in the years since AzEIP began, have resulted in a steady shift in service settings, away from settings where only children with disabilities participate, to settings such as the home, park, child care facilities, and other community places.

The AzEIP Standards of Practice, required of all service providers in early intervention since 2001, embeds the philosophy of providing families supports and services in natural environments throughout the knowledge and skills components. The Standards of Practice helps practitioners understand the importance of learning a family's routines and activities, so they can identify the natural learning opportunities available to children throughout their daily activities.

The AzEIP IFSP Guidance Document describes the federal requirements, philosophical tenets, and practice guidelines for providing services in natural environments. The statewide IFSP form provides a structure and format for developing IFSPs in alignment with the requirements and intent of the law.

Through its Continuous Monitoring and Quality Improvement System, described fully in Indicator 9, AzEIP monitors programs' compliance with the natural environment requirement. Both program self-assessments and on-site monitoring visits reinforce the requirements and philosophy behind providing services to families and children in natural environments.

Baseline Data for FFY 2004 (2004-2005):

618 Table 2	2004
Percentage of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children.	86%
Setting- "Other", including parks, libraries and community centers.	11%

Discussion of Baseline Data:

As of December 1, 2004, 618 Settings data indicate that home and programs designed for typically developing children and other settings are identified as the setting of the predominant service for 97% of children receiving Part C services. Fewer than 3% of children are receiving their predominant

services in a non-natural environment. The percentage of children served in the home, programs for typically developing children, and other community settings increased from 62% to 85% between 1999 and 2002 and has remained steady since that time.

FFY	Measurable and Rigorous Target
2005 **(2005-2006)**	**86%**
2006 **(2006-2007)**	**86%**
2007 **(2007-2008)**	**88%**
2008 **(2008-2009)**	**90%**
2009 **(2009-2010)**	**92%**
2010 **(2010-2011)**	**94%**

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Continued implementation of the AzEIP Standards of Practice for early intervention professionals to support understanding of early intervention in natural environments.	December 2005 with annual trainings and ongoing test options	CSPD Coordinator, ASDTP
Participate on Arizona Inclusion Coalition to expand awareness of natural environments for early childhood programs.	December 2005 and ongoing	CSPD Coordinator
Provide focused technical assistance to programs that do not comply with natural environments.	December 2005 and ongoing	CQI Coordinators, Technical Assistance & Monitoring Specialists
Incorporated are the improvement activities from Indicator #1 concerning the implementation and maintenance of AzEIP's team-based service delivery model.		
Revise data collection process for settings data to conform with OSEP guidelines. New activity to improve data accuracy.	January-June 2007	AzEIP staff, participating agency MIS staff, and Data Accuracy TA Center
Implement data editing and validations processes in order to identify unusual findings in a timely manner, include regular review/monitoring of	January-June 2007	AzEIP, participating agencies, Data Accuracy TA Center

programs/public agencies' practices in collecting, editing and reporting data. New activity to improve data accuracy.		
Implement system management and documentation procedures for maintaining the integrity of the data collection and reporting systems. New activity to improve data accuracy.	January-June 2007	AzEIP, participating agencies, Data Accuracy TA Center
Work with Data Accountability Center to review data collection and reporting. New activity to improve data accuracy.	January-June 2008	Data Accountability Center has agreed to provide TA.

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

DES/AzEIP used progress data from the reporting period to prepare its response for this indicator. The progress data were presented at a stakeholders' meeting on January 11, 2008 at which time improvement activities completed and to be completed were discussed.

Monitoring Priority: Early Intervention Services In Natural Environments

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Indicator 3: Percent of infants and toddlers with IFSPs who demonstrate improved:

>   A. Positive social-emotional skills (including social relationships);

>   B. Acquisition and use of knowledge and skills (including early language/ communication); and

>   C. Use of appropriate behaviors to meet their needs.

Measurement:

A. Positive social-emotional skills (including social relationships):

    a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

    b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

    c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

    d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

    e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

If a + b + c + d + e does not sum to 100%, explain the difference**.**

B. Acquisition and use of knowledge and skills (including early language/communication and early literacy):

    a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

    b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

    c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of infants and toddlers who improved functioning to a level nearer to

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same-aged peers but did not reach it) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

If a + b + c + d + e does not sum to 100%, explain the difference.

C. Use of appropriate behaviors to meet their needs:

a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by the (# of infants and toddlers with IFSPs assessed)] times 100.

c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it) divided by the (# of infants and toddlers with IFSPs assessed)] times 100.

d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by the (# of infants and toddlers with IFSPs assessed)] times 100.

e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by the (# of infants and toddlers with IFSPs assessed)] times 100.

If a + b + c + d + e does not sum to 100%, explain the difference

Overview of Issue/Description of System or Process:

Arizona made two small changes to its process:
  o   Additional test instruments were added to the approved tool list.
  o   Formatting changes were made to the Child Indicator Summary Form to improve data collection.

Arizona adopted the ECO Center's Child Outcomes Summary Form and renamed it the Child Indicator Summary Form (CISF). Minor adaptations were made to the form to capture necessary demographic information and change the ratings from numbers to letters so children would not be rated a high or low number. The following is the State's description of its process:

Child Indicator Summary Entry Forms were to be completed for all infants and toddlers referred after June 15, 2006 who were (i) age 2.6 years or younger, (ii) eligible for AzEIP, and (iii) interested in early intervention and had an initial IFSP meeting. Programs could begin collecting exit data on December 15, 2006, which was six months after the first entry data could be collected, as children must have been receiving services for at least six consecutive months for data to be collected. Exit data is collected for a child who exits early intervention regardless of the reason, as long as the child meets the 6-month

requirement. The exit rating is determined no later than 90 days prior to the child's transition/exit from early intervention.

The child's IFSP team, which includes the family, uses the 7–point Child Indicator Summary Form (CISF) to summarize outcome data from a variety of sources, including parent report, observation, a broad spectrum tool, other evaluation results, and available records. Arizona has approved certain broad spectrum tools that (i) ensure all areas of development are assessed, and (ii) have been, or are in the process of being, cross-walked by the ECO Center. Programs may choose any tool on the following list:

- o   The Ounce Scale
- o   Battelle Developmental Inventory - Second Edition
- o   Bayley Scales of Infant Development - Third Edition
- o   Brigance Diagnostic Inventory of Early Development - Second Edition
- o   Carolina Curriculum for Infants and Toddlers with Special Needs
- o   Developmental Assessment of Young Children (DAYC)
- o   Early Learning Accomplishment Profile (ELAP)
- o   Hawaii Early Learning Profile (HELP)
- o   Infant -Toddler Developmental Assessment (IDA) Record with Provence Birth-to-Three Developmental Profile
- o   Michigan Early Intervention Developmental Profile (MI EIDP)
- o   The Oregon Project for Visually Impaired and Blind Preschool Children Skills Inventory - Fifth Edition

All Initial Planning Process contractors and AzEIP service-providing agencies send completed entry and exit CISFs to the State office on a monthly basis via mail, fax, or e-mail. DES/AzEIP created a database for the child outcomes data, which is entered by DES/AzEIP staff as the forms are received from all contractors and agencies, except for the Division of Developmental Disabilities (DDD). DDD revised its database, FOCUS, to capture the child indicator data, and DDD service coordinators enter the data into FOCUS. DES/AzEIP receives FOCUS data containing the child indicator data from DDD on a monthly basis.

The DES/AzEIP database has been programmed using the ECO Center algorithms to calculate child progress. That database links to current data systems of the AzEIP service-providing agencies, to ensure necessary demographic information is captured. Using database information, the child's entry ratings are matched to the exit ratings and progress data is calculated using the algorithms. DDD service coordinators enter the data they collect into the DDD FOCUS system. DES/AzEIP downloads the data regularly to capture the child indicator entry and exit data. At this time, DES/AzEIP is not able to match the DDD FOCUS entry with the DDD exit data.

DES/AzEIP has adopted the ECO Center's form and, therefore, DES/AzEIP's definition for "comparable to same-aged peers" is a child who has been scored as an "E" or "T" on the form, which equates to ECO Center's 6 or 7.

Baseline Data for FFY 2004 (2004-2005):

DES/AzEIP will submit baseline data in 2010.

The first year of progress data for children exiting in 2006-2007 is presented in the tables below.

A. Positive social-emotional skills (including social relationships):	Number of children	% of children
a. Percent of infants and toddlers who did not improve functioning.	2	9%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers.	2	9%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach a level comparable to same-aged peers.	4	18%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers.	7	32%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers.	7	32%
Total	N= 22	

B. Acquisition and use of knowledge and skills (including early language/communication):	Number of children	% of children
a. Percent of infants and toddlers who did not improve functioning.	3	13.6%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers.	3	13.6%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach a level comparable to same-aged peers.	5	22.7%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-	5	22.7%

aged peers.		
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers.	**6**	**27.3%**
Total	N= 22	

C. Use of appropriate behaviors to meet their needs:	**Number of children**	**% of children**
a. Percent of infants and toddlers who did not improve functioning.	**2**	**9.1%**
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers.	**4**	**18.2%**
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach a level comparable to same-aged peers.	**4**	**18.2%**
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers.	**6**	**27.2%**
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers**.**	**6**	**27.2%**
Total	N=22	

Discussion of Baseline Data:

Progress data reported in 2010 will be considered baseline data.

Progress Data:
Arizona began collecting entry data for all children made eligible after June 15, 2006 and six months later was able to begin collecting exit data. Progress data were available for 22 children during the possible six months of the reporting period. The length of time the 22 children participated in services ranged from 6 to 12 months, due to the limited time to measure data in this reporting period. Eighteen (18) of the 22 children in the data set had the entry rating when the child was between 25-30 months old and the other 4 children were between 19-24 months old.

Discussion of Progress Data:

DES/AzEIP captured data for 2,373 entry ratings during the reporting period received from all but one county, LaPaz. All but three programs submitted forms and those programs are in rural counties serving a small number of children and families. For a limited comparison of how many potential entry ratings

could have been collected, DES/AzEIP conducted 4,825 initial IFSPs during the reporting period. This figure, however, includes children who would not have an entry rating because they were 2.6 years old or older. Also, there were potentially children who left the program prior to completing six months in the program and, therefore, would not have exit data.

    Also contributing to the low number of children was the fact that there were an additional 129 children with exit ratings in DDD's FOCUS database who could not be matched to entry ratings, so progress data was not captured. DES/AzEIP is not yet able to match the FOCUS data with its entry data to capture progress data, but is developing a process and program to match the entry and exit ratings for each child as an additional improvement activity, with an anticipated completion date of June 2008. Due to the challenges involved in capturing progress data in the FOCUS database, DES/AzEIP has required all DDD service coordinators to submit the completed CISFs to DES/AzEIP in addition to entering the data into FOCUS.

Another reason for the low number of children for whom progress data were available was the failure of a large DES/AzEIP contractor to complete entry ratings for a period of three months. To resolve this issue, DES Office of Procurement issued a Demand for Assurance to this contractor in October 2006 on this issue, and the contractor subsequently began completing the forms.

FFY	Measurable and Rigorous Target
2005 **(2005-2006)**	*NA for this reporting period. Targets will be set in 2010.*
2006 **(2006-2007)**	*NA for this reporting period. Targets will be set in 2010.*
2007 **(2007-2008)**	
2008 **(2008-2009)**	
2009 **(2009-2010)**	
2010 **(2010-2011)**	

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Status
In collaboration with staff from the ECO Center, DES/AzEIP provided Child Outcomes Trainings for AzEIP IPP contractors and service-providing agencies involved in the collection of entry data.	May 2006	Initial training completed 2006. Ongoing TA provided periodically and as needed.
Telephone conference with staff from the ECO Center, to address issues and concerns as programs began to use the tools and forms.	September 2006	Completed
An iiTV (interactive instructional TV) training for all agencies involved in the on-going services to children who would be involved in exit ratings.	November 2006	Completed

Improvement Activities	Timelines	Status
Training for approximately 60 service coordinators in Maricopa County.	December 2006	Completed
Onsite monitoring visits for Cycle 4 (Pinal, Gila, Graham, Greenlee, and Cochise Counties) was provided on the child indicator forms and process. Non-compliance was included in the program's Correction Action Plan.	March – May 2007	Completed
DES/AzEIP developed a new database to calculate the measurements required for this Indicator. DES/AzEIP Staff enters the child's I.D. from the CISF sent to the office and the field is populated with demographic information from AzEIP's ACTS database. The entry ratings are then entered into the database. When entering an exit rating, the exit rating is matched to the entry rating, allowing progress data to be calculated.	June 2006 – December 2006	Completed
DES/AzEIP published for public comment and thereafter revised its monitoring policy to incorporate the child indicators into its policies and procedures. In addition, new contracts procured from DES/AzEIP will expressly include the procedures for completing the CISF.	April 2007	Completed
DES/AzEIP works closely with AzEIP service-providing agencies to ensure that the necessary data elements needed for the new database are entered into the current data systems. The programs are encouraged to monitor their data system on at least a monthly basis, to ensure accurate and timely data collection.	August 2007 - 2010	Completed with DDD in September 2007. Work continues with ASDB.
Regional TAMS provided support on the child indicators in Yuma and on the Navajo Nation.	August – December 2007	Completed
DES/AzEIP is developing a data-handling plan, which includes a regular review (at least bi-annually) of the child indicator data. Through this review, DES/AzEIP will determine which programs are not submitting the CISFs to the DES/AzEIP office and provide technical assistance to ensure the forms are submitted.	October 2007 – September 2008	In progress. Data reviews occurring bi-annually.
DES/AzEIP will develop a mechanism to match the exit ratings for children entered in DDD's FOCUS with the entry rating that was entered into DES/AzEIP child indicator database.	May – December 2008	To begin May 2008
DES/AzEIP will conduct a regular review of the data, at least biannually, to identify needed technical assistance. DES/AzEIP will compare the number of eligible children with the number of data entry forms it receives and the number of children exiting the program with the number of	December 2007 - 2010	Implemented in December 2007

Improvement Activities	Timelines	Status
exit forms it receives.		
DES/AzEIP will continue the onsite technical assistance to programs during monitoring visits and support local programs to review random samples of the CISFs for accuracy and completeness.	January 2008 and ongoing	In progress
DES/AzEIP will include an opportunity for questions and answers during the regional quarterly meetings and provide technical assistance.	July 2008 and ongoing	To begin July 2008
DES/AzEIP will review a random sample of CISFs and compare with the database to reduce errors.	Quarterly beginning June 2008 and ongoing	To begin June 2008

Indicator 4

NEW INDICATOR

Monitoring Priority: Early Intervention Services in Natural Environments

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Indicator – 4. Percent of families participating in Part C who report that early intervention services have helped the family:

A. Know their rights;

B. Effectively communicate their children's needs; and

C. Help their children develop and learn.

Measurement:

A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.

B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100.

C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

Overview of Issue/Description of System or Process:

Overview: DES/AzEIP reviewed the surveys created by the National Center for Special Education Accountability and Monitoring (NCSEAM) and the Early Childhood Outcomes Center. Based upon feedback from the early intervention community suggesting a one-page survey, as well as the potential for collaboration with Part B, DES/AzEIP proposed use of the NCSEAM survey. After input at its stakeholder meeting held in November 2005, DES/AzEIP decided to use the NCSEAM survey section entitled "Impact of Early Intervention Services on Your Family" for this indicator.

DES/AzEIP discussed the survey and instructions, obtaining input from stakeholders at a statewide meeting in January 2006. In March 2006, at another statewide meeting, the finalized survey and instructions were shared and discussed. In March 2006, DES/AzEIP disseminated the survey with instructions via e-mail for implementation on April 1, 2006.

The average score, recommended target data, and improvement activities were provided to a group of stakeholders and the ICC in January 2007 for input.

Description of Process:
1. The service coordinator is responsible for explaining the survey to the family in a way that is meaningful and reflective of the value of the family's input. Explaining the survey includes sharing with the family that the survey is important for DES/AzEIP and AzEIP providers to know how the system is working and what improvements are needed.

2. To ensure that all families have the opportunity to respond to the survey, the service coordinator must make efforts to provide the survey to the family, in the family's native language or other mode of communication. Written surveys are currently available in English and Spanish.
3. Prior to giving the family a survey, the service coordinator is responsible for completing the demographic information section at the top of the survey and reviewing this information with the family to make sure it is accurate. The family should complete "Date Completed" at the time the survey is completed.
4. The service coordinator is responsible for asking the family if they would like help completing the survey. Suggestions for those who might help the family include the service coordinator, other personnel within the agency, a service provider, the local program coordinator, and/or a family advocate.
5. The service coordinator will ensure the family is given the survey at the end of the annual IFSP and/or at the last meeting with the family prior to exiting early intervention.
6. A preprinted postage-paid envelope with the DES/AzEIP return address is provided to families with each survey.

DES/AzEIP created a database for the data from the family surveys. Surveys are received at the DES/AzEIP office and all information (demographic and ratings) are entered into the database. The database allows DES/AzEIP to run reports by program, county, ethnicity, and age of child at time of survey completion.

Due to the implementation date for the survey (April 2006), DES/AzEIP received a small number of surveys for FFY 2005. DES/AzEIP changed its reporting period by expanding the date until October 2006 in order to collect and analyze a larger number of surveys to better represent the population the State serves.

DES/AzEIP will revisit discussions with the Arizona Department of Education to determine whether utilization of their online survey database is feasible at some future date. DES/AzEIP will also include an improvement activity to explore other online survey possibilities.

Baseline Data FFY 2006:

The percent of families participating in Part C who report that early intervention services have helped their family:

A.   Know their rights - 94%

Count	18	2	7	101	108	215
Rating	1	2	3	4	5	6
Description of Rating	Very Strongly Disagree	Strongly Disagree	Disagree	Agree	Strongly Agree	Very Strongly Agree

B.   Effectively communicate their children's needs - 95%

Count	17	0	5	120	114	183
Rating	1	2	3	4	5	6
Description of Rating	Very Strongly Disagree	Strongly Disagree	Disagree	Agree	Strongly Agree	Very Strongly Agree

C.   Help their children develop and learn - 96%

Count	17	0	2	91	114	223
Rating	1	2	3	4	5	6
Description of Rating	Very Strongly Disagree	Strongly Disagree	Disagree	Agree	Strongly Agree	Very Strongly Agree

The percent reported as baseline data for each of the sub-indicators is the percent of families with a score greater than or equal to 4, "agree."

Discussion of Data:

The dissemination of surveys at the annual IFSP is monitored through onsite monitoring. For Cycle 4 monitoring, which occurred during the reporting period, 80% of the files reviewed (24/30) demonstrated the dissemination of the family survey at the annual IFSP. The non-compliance was included in the Corrective Action Plan for the agency with non-compliance and correction of the identified area will continue to be monitored.

DES/AzEIP is not currently able to compare the number of surveys received with the number of surveys disseminated as it does not capture census data on annual IFSPs, when the survey is disseminated.

DES/AzEIP analyzed the surveys by county, ethnicity, and age of the children for whom surveys were received to determine whether the data received was representative of the children it served. That comparison is set out below:

Ethnicity:	**618 Data (12/01/06)**	**AZ Survey Data**
American Indian	7.51%	3.16%
Asian or Pacific Islander	1.62%	1.58%
Black or African American	4.62%	3.16%
Hispanic or Latino	38.46%	28.69%
White	47.78%	63.17%

Age:	**618 Data (12/01/06)**	**AZ Survey Data**
0-1	11.10%	5.7%
1-2	30.99%	37.7%
2-3	57.92%	56.5%

Using a sampling error of 4%, the surveys received appear to: (i) represent the approximate population served for American Indian, Asian or Pacific Islander, and Black or African American; (ii) under-represent the Hispanic or Latino population; and (iii) over-represent the Caucasian population. However, given the single digit percentages for the American Indian population, and using the 4% sampling error rate, the surveys are likely not representative of the American Indian population served in Arizona. DES/AzEIP's improvement activities include monitoring the representation throughout the year, and will focus technical activities to utilize the new Family Technical Assistance and Monitoring Specialist, who is bilingual, to reach out to the Hispanic community to increase family participation in the survey.

The surveys represent the children served ages 2-3 but not the 0 -1 or 1-2 population. Given that the surveys are first disseminated at the annual IFSP, the earliest a family would receive a survey would be when the child is one year old, and that would only be for children who were referred at birth. Therefore, the 0-1% will not match the 0-1 served for the State. DES/AzEIP will monitor the percentage for 0-2 throughout the year to determine whether more focused surveying is required.

As to geographic representation, DES/AzEIP received surveys from families in 13 out of the 15 counties in Arizona. The two counties from which surveys were not received, Greenlee and LaPaz, are rural

counties and serve .02% and .5% respectively, of the children statewide. Greenlee County was included in the onsite monitoring this year and was in 100% compliance for dissemination of the family survey. LaPaz was not in the monitoring cycle; however, follow-up and technical assistance through DES/AzEIP were provided.

Copies of Arizona's survey in English and in Spanish are provided with this report.

FFY	Measurable and Rigorous Target
2005 **(2005-2006)**	**N/A**
2006 **(2006-2007)**	A. Know their rights – 90% B. Effectively communicate their children's needs – 90% C. Help their children develop and learn – 90%
2007 **(2007-2008)**	**X%** .
2008 **(2008-2009)**	**X%**
2009 **(2009-2010)**	**X%**
2010 **(2010-2011)**	**X%**

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Revise IFSP form to include requirement for service coordinators to explain and disseminate family survey to families at each annual IFSP.	January 2007	CQI Coordinators, TA Specialist, CSPD Coordinator and TAMS
Revise Child File Audit to align with requirement to disseminate family survey at each annual IFSP and at or near transition.	March 2007	CQI Coordinators and TAMS
Include requirement to disseminate family survey at or near exit on exit checklist for service coordinators.	June 2007	CQI Coordinators and TAMS

Ensure agenda item on each Quarterly Regional meeting for Family Survey discussion:
  - review procedures for surveys;
  - discuss APR and local reporting of family outcomes;
  - provide surveys;
  - receive feedback on process.
	January 2007 and ongoing	CQI Coordinators, CSPD Coordinator and TAMS

Ongoing review of distribution of family surveys during monitoring activities.	March 2007 and with cyclical monitoring visits	CQI Coordinators
Monitor representativeness and completeness of surveys at least bi-annually and provide focused technical assistance to programs.	June 2007 and bi-annually thereafter	CSPD Coordinator and CQI Coordinators

Research structural and financial ability for online surveys.
    If feasible:
  - create online capability for surveys;
  - Implement online surveys.
	January 2008
	
	March 2008
	December 2008
		Management Information Coordinator, TA Specialist, CSPD Coordinator and CQI Coordinators

Seek technical assistance from NCSEAM, in collaboration with NAU, for considerations in analyzing the data for the next APR.	September 2007	CSPD Coordinator and NAU ASDTP Staff

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2006

Improvement Activities	Timelines	Resources
Include requirement to disseminate family survey at or near exit on exit checklist for service coordinators. **Justification: DES/AzEIP was not able to prepare the exit checklist for service coordinators due to the fact that DES/AzEIP and the Arizona Department of Education revised the Transition Intergovernmental Agreement (IGA), and final revisions to the transition requirements were not completed until August 2007.**	March 2008	CQI Coordinators and TAMS.
Ongoing review of distribution of family surveys during monitoring activities **_and follow-up on correction of identified non-compliance_**. **Justification: DES/AzEIP is revising its activity related to monitoring of the dissemination of family surveys to include the follow-up on correction of identified non-compliance. This activity has been in place since implementation of its monitoring system, and DES/AzEIP is expanding the activity to reflect this practice.**	March 2007 and with cyclical monitoring visits	CQI Coordinators
Seek technical assistance from NCSEAM, in collaboration with NAU, for considerations in analyzing the data for the next APR.	NA	NA

Improvement Activities	Timelines	Resources
Justification to remove: DES/AzEIP is removing its last improvement activity of seeking technical assistance from NCSEAM for conducting the Rausch analysis for its family surveys. It currently has the capability and capacity to measure its data using the rating scale as discussed above, and does not intend to pursue other measurements at this time.		

Indicator 5

Overview of the State Performance Plan Development: Described in Indicator 1.

Monitoring Priority: Effective General Supervision / Child Find

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Indicator – 5. Percent of infants and toddlers birth to 1 with IFSPs compared to:

   A. Other States with similar eligibility definitions; and

   B. National data.

Measurement:

A. Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.

B. Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to National data.

Overview of Issue/Description of System or Process:

Arizona utilizes a comprehensive and coordinated system of public awareness and child find efforts to locate, identify, and evaluate all potentially eligible children. Public awareness efforts are directed toward education, health and human service agencies (including agencies serving homeless children and families), tribes and tribal organizations, physicians, hospitals, and other health care providers, families, and child protective services workers. Coordinated efforts include broad dissemination of information, presentation to and training of referral sources, joint child find activities with schools and health care and social service agencies, an online referral system, interagency agreements, and memoranda of understanding.

DES/AzEIP monitors its Child Find and Public Awareness activities through the Program Self-Assessments completed by agencies and programs each year and the on-site monitoring visits. In addition, the local program coordinators, contracted to implement AzEIP's Child Find and Public Awareness Plan, submit monthly reports documenting their activities, as well as, annual summary reports, all of which are monitored and evaluated on an ongoing basis by DES/AzEIP.

Baseline Data for FFY 2004 (2004-2005):

A. Comparison to other states with narrow eligibility requirements:

Rank	State	Percentage of infants under 1
1	Idaho	1.75%
2	North Dakota	1.58%
3	Oklahoma	1.35%
4	Montana	1.33%
5	District of Columbia	1.23%
6	Guam	1.13%
7	Connecticut	.93%
8	South Carolina	.78%

9	Oregon	.74%
10	Tennessee	.73%
11	Utah	.66%
12	Maine	.65%
13	Nebraska	.64%
14	**Arizona**	**.59%**
15	Georgia	.48%
16	Nevada	.47%

B. **Arizona's national rankings with regard to number and percentage of infants birth to 1 receiving early intervention services:**

2004	Baseline
National	.92%
Arizona	**.61%**

Discussion of Baseline Data: The percentage of infants birth to 1 has increased slowly but steadily from .50% in 2001 to .60% in 2004. In previous years, child find efforts focused on encouraging the referral of children under one year of age, and this had a small impact on the percentage of infants served. Analysis of referral data for October 2003 through June 2005 reveals that infants and young toddlers are being referred to AzEIP in substantial numbers and comprise a full 1/3 of all referrals to AzEIP during that period. Despite the large number of infants 0-1 referred to AzEIP, the percent of the population served on Dec.1, 2004 was .61% as compared to 1.54% of children 0-3. Anecdotal evidence suggests that evaluation teams need technical assistance to develop strategies and expertise in evaluating children under the age of 6 months in relation to Arizona's narrow eligibility definition and to develop strategies for serving very young infants.

FFY	Measurable and Rigorous Target
2005 **(2005-2006)**	**.63% of infants birth to 1 with IFSPs receiving early intervention services on Dec. 1**
2006 **(2006-2007)**	**.67% of infants birth to 1 with IFSPs receiving early intervention services on Dec. 1**
2007 **(2007-2008)**	**.70% of infants birth to 1 with IFSPs receiving early intervention services on Dec. 1**
2008 **(2008-2009)**	**.74% of infants birth to 1 with IFSPs receiving early intervention services on Dec. 1**
2009 **(2009-2010)**	**.77% of infants birth to 1 with IFSPs receiving early intervention services on Dec. 1**

2010 (2010-2011)	.80% of infants birth to 1 with IFSPs receiving early intervention services on Dec. 1

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Implement strategies to support child find and service provision to infants 0-1.		
Target public awareness to primary referral sources about referring infants and as required by IDEA, 2004.	December 2005 and Ongoing	Local Program Coordinators, TA Specialist
Track and analyze data related to age of children found eligible for Part C compared to data related to age at referral.	December 2005 and Ongoing	TA Specialist, Management Information Coordinator
Research strategies utilized by states with similar eligibility criteria for evaluating and assessing infants birth to 1.	July 2007	Technical Assistance and Monitoring Specialists (TAMS), DES/AzEIP Staff
Implement evaluation strategies identified through research.	September 2007	Local Program Coordinators, Technical & Assistance Monitoring Specialists, DES/AzEIP Staff
Identify resources for providers related to evaluation and services for premature infants and children exposed to substances.	January 2007	DES/AzEIP Staff, Technical & Assistance Monitoring Specialists
Develop and/or strengthen collaboration between AzEIP child find system and regional hospital Newborn Intensive Care system, including Newborn Intensive Care Units (NICUs), Newborn Follow-up, Healthy Steps, and related programs.	July 2007 through December 2008	DES/AzEIP Staff, Technical Assistance and Monitoring Specialists, Local Program Coordinators, local Initial Planning Process contractors.
Conduct further drill-down of data, following up on questions and hypotheses that emerged from data analysis conducted 2005-2006.	April 2007 through December 2008	Technical Assistance Specialist, Management Information Coordinator
Incorporated herein are the improvement activities from Indicator #1 regarding implementation of the team-based model.		
Incorporated herein are the improvement activities from Indicator #6 regarding general public awareness, collaborative efforts, and data collection and analysis.		

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2006:

Improvement Activities	Timelines	Resources

Develop and/or strengthen parent to parent support networks to enhance public awareness to primary referral sources regarding referral of infants as required by IDEA, 2004. **New Activity identified through research of successful strategies in other states.**	January 2008	Family Technical Assistance and Monitoring Specialist, DES/AzEIP staff
Collaborate with NICUs to develop referral procedures that will ensure timely receipt of medical records, discharge summaries, developmental evaluations, and other pertinent medical information that will assist teams in determining eligibility for infants discharged from NICUs. **New Activity identified through research of successful strategies in other states**	July 2008	DES/AzEIP staff, Technical Assistance and Monitoring Specialists
Collaborate with the Arizona Department of Education to conduct coordinated, regional public awareness and child find activities. **New Activity identified through research of successful strategies in other states**	July 2008	Family Technical Assistance and Monitoring Specialist, DES/AzEIP staff
Improve data collection related to child count. **New Activity related to identification of data problem.**	January 2008- January 2009	DES/AzEIP Staff, Technical Assistance and Monitoring Specialists, Agency partners
Conduct monthly review of submitted data for completeness and accuracy. **New Activity related to identification of data problem.**	January 2008 and ongoing	DES/AzEIP staff

Indicator 6

Overview of the State Performance Plan Development: Described in Indicator 1.

Monitoring Priority: Effective General Supervision / Child Find

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Indicator – 6. Percent of infants and toddlers birth to 3 with IFSPs compared to:

   A. Other States with similar eligibility definitions; and

   B. National data.

(20 USC 1416(a)(3)(B) and 1442)

Measurement:

A. Percent = # of infants and toddlers birth to 3 with IFSPs divided by the population of infants and toddlers birth to 3 times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.

B. Percent = # of infants and toddlers birth to 3 with IFSPs divided by the population **of infants and** toddlers birth to 3 times 100 compared to National data.

Overview of Issue/Description of System or Process: Arizona utilizes a comprehensive and coordinated system of public awareness and child find efforts to locate, identify, and evaluate all potentially eligible children. Public awareness efforts are directed toward education, health and human service agencies (including agencies serving homeless children and families), tribes and tribal organizations, physicians, hospitals and other health care providers, families, and child protective services workers. Coordinated efforts include broad dissemination of information, presentation to and training of referral sources, joint child find activities with schools, health care and social service agencies, an online referral system, interagency agreements, and memoranda of understanding.

Baseline Data for FFY 2004 (2004-2005):

   A. Comparison to other states with narrow eligibility requirements:

Rank	State	Percentage of birth through 2 population served	Percentage **increase** in resident population birth through 2	Rank
1	Connecticut	3.16%	-.32%	14
2	North Dakota	3.02%	1.39%	4
3	Idaho	2.90%	2.09%	2
4	Maine	2.89%	.91%	8
5	Montana	2.21%	.46%	11
6	Oklahoma	2.03%	.50%	10
7	Utah	1.87%	-.04%	13
7	South Carolina	1.87%	.59%	9
8	Tennessee	1.80%	1.17%	6
9	Oregon	1.78%	.04%	12

10	District of Columbia	1.68%	3.20%	1
11	Nebraska	1.67%	1.03%	7
12	**Arizona**	**1.61%**	**2.00%**	**3**
13	Guam	1.47%	No Data	
14	Nevada	1.36%	1.99%	4
15	Georgia	1.34%	1.46%	5

B. Arizona's national rankings with regard to number and percentage of infants and toddlers receiving early intervention services:

	Baseline	Percent change 2000 to 2004
National	2.24%	23%
Arizona	**1.54%**	**21%**

Discussion of Baseline Data:

Among states with narrow eligibility requirements (as defined by OSEP) Arizona ranked 5th out of 8 based on December 2004 child count data. Among all states and territories Arizona ranked 45th out of 56.

According to the US Census Bureau, Arizona had the nation's highest growth rate among children under 5 for the period April 2000 to July 2003. Arizona has the second highest population growth rate overall, just behind Nevada. The rapid growth of Arizona's under-5 population is a very significant factor that continues to impact Arizona's comparable child count data. The December 1 count of children served by AzEIP grew by 43% from 2000 to 2004. The percentage of the 0-3 population served increased from 1.27% to 1.54%, a 21% increase. During that same period the state experienced an overall population growth rate of 9.7%.

FFY	Measurable and Rigorous Target
2005 **(2005-2006)**	**1.59%**
2006 **(2006-2007)**	**1.65%**
2007 **(2007-2008)**	**1.72%**
2008 **(2008-2009)**	**1.80%**
2009 **(2009-2010)**	**1.88%**
2010 **(2010-2011)**	**1.95%**

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Update Public Awareness Plan.		
Revise strategies to identify and inform families of children who: ● move frequently or are hard to locate (such as migrant workers, homeless and military families); ● have premature infants or infants with other physical risk factors; ● are involved with the behavioral health and Medicaid system; ● are involved with the child protective system (children are wards of the State).	January 2006 and ongoing	TA Specialist, Local Program Coordinators, Technical Assistance & Monitoring Specialists, CQI Coordinators
Continue PA efforts to primary referrals sources.	December 2005 and ongoing	TA Specialist, Local Program Coordinators, Technical Assistance & Monitoring Specialists, CQI Coordinators
Develop and maintain collaborative efforts with agencies and organizations representing primary referral sources.		
Continue implementation of Child Find IGA with Arizona Department of Education.	Ongoing	CSPD Coordinator, CQI Coordinators, TA Specialist, Management Information Coordinator
Continue to develop and implement agreements with Early Head Start, Healthy Families, and tribal early care and education programs that outline child find and public awareness responsibilities and efforts.	Ongoing	CQI Coordinators, CSPD Coordinator, and Executive Director
Collect, analyze, and utilize public awareness and child find data (e.g. referral source data, child demographics, public awareness materials) to guide efforts.		
Track and analyze public awareness distribution data by county.	December 2005 and annually through 2010	Management Information Coordinator, TA Specialist
Analyze referral data to identify patterns by county or referral source, including CAPTA, health and medical community, programs serving homeless children, etc.	December 2005 and ongoing	Management Information Coordinator, TA Specialist
Analyze 618 data to identify patterns by county.	December 2005	Management Information Coordinator, TA Specialist
Share data analysis findings with regional child find participants.	December 2005 and ongoing	Management Information Coordinator, TA Specialist
Incorporated herein are the improvement activities from: ● Indicator # 1 regarding the team-based model; ● Indicator # 5 regarding activities for identifying infants birth to 1.		

Revisions, <u>with Justification</u>, to Improvement Activities / Timelines / Resources for FFY 2006-2010:

Improvement Activities	Timelines	Resources
Improve data collection related to child count. **New Activity related to identification of data problem.**	January 2008- January 2009	DES/AzEIP Staff, Technical Assistance and Monitoring Specialists, Agency Partners
Conduct monthly review of submitted data for completeness and accuracy. **New Activity related to identification of data problem.**	January 2008 and ongoing	DES/AzEIP staff

Indicator 7

Overview of the State Performance Plan Development: Described in Indicator 1.

Monitoring Priority: Effective General Supervision / Child Find

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Indicator – 7. Percent of infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.

Measurement: Percent = [(# of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline) divided by the (# of eligible infants and toddlers evaluated and assessed)] times 100.

Account for untimely evaluations.

Overview of Issue/Description of System or Process:

The unique composition of Arizona, both geographically and culturally, present unique challenges in ensuring that all families and children have an IFSP developed within 45 days of referral. Located in the southwest United States, Arizona is composed of densely populated metropolitan areas and vast, desert rural areas. It has 21 tribes represented with different regulatory bodies and different cultures and languages. For example, Havasupai Reservation located deep within a gorge of the Grand Canyon, can only be reached by an eight mile hike, horseback ride or helicopter. Arizona borders Mexico on the south. Arizona also has a population of migrant workers who travel to Arizona with their families and work seasonally. Arizona also has four military bases. All of these factors contribute to the many challenges of ensuring families receive the evaluation and assessment and initial IFSP meeting within 45 days from referral.

Referrals to the early intervention program are received by Initial Planning Process (IPP) contractors throughout the State. The IPP contractors implement screening, as appropriate, to identify children suspected of having a developmental delay or disability as defined by Arizona's eligibility criteria. For children suspected of having a developmental delay or disability, the IPP contractor conducts a multidisciplinary evaluation and assessment, determines AzEIP eligibility, and facilitates the determination of eligibility for one or more of the AzEIP service providing agencies, of which there are four. If eligible, the IPP contractor then works in partnership with the family and individuals likely to be involved in ongoing service coordination and service delivery to develop the Individualized Family Service Plan (IFSP).

Arizona interprets compliance with the 45-day timeline as completion of the IFSP (rather than conducting the initial IFSP meeting). This may significantly limit the State's ability to demonstrate compliance.

Individual child evaluation and assessment and IFSP data is tracked through the ACTS system and AzEIP service providing agency tracking systems. The data is tracked and reported on a monthly basis. The data is reviewed, analyzed, and reported by contractor, program, and region on a quarterly basis. AzEIP focuses monitoring and improvement efforts on those regions/contractors experiencing the most difficulty. Arizona continues to work on improving its timelines for evaluation, assessment and initial IFSP development, an ongoing area of non-compliance.

Baseline Data for FFY 2004 (2004-2005):

Eligible children	Eligible children with IFSPs conducted within 45 day timeline	Percent of eligible children for whom an evaluation and assessment and an initial IFSP was conducted within 45 day timeline
3266	1115	34%

Discussion of Baseline Data:

The data reveals considerable variation across regions, contractors and programs with regard to the timeliness of evaluation and assessment and IFSP. During 2004-2005, three of fourteen programs reported that for more than 60% of referrals, initial IFSPs were developed within 45 days; in contrast, four contractors reported rates of less than 30%. Compared to 2003-2004 data there was some improvement in program performance.

Data confirmed anecdotal reports from contractors that evaluations and AzEIP eligibility determinations are conducted in a more timely manner, with 75% of evaluations and assessments completed within 45 days and 92% conducted within 71 days. In contrast, only 63% of initial IFSPs were developed within 71 days of the initial referral, and 85% are developed within 99 days. Data and anecdotal reports indicate that there are significant difficulties (i) coordinating initial IFSP development with the ongoing service coordination providers, and (ii) ensuring capacity to provide ongoing service coordination. Initial results from file reviews conducted during monitoring visits support these anecdotal reports.

The ACTS data tracking system has been revised to gather more detailed data related to the reason for timeline delays for eligibility determination, and initial IFSP meeting. This additional data is being collected as of September 2005 and will be reviewed beginning November 2005. It is hoped that the "reason" data will provide focus for improvement efforts at the program, regional and state level. AzEIP continues to work with other agency data systems to add fields to collect required data elements.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	37%
2006 (2006-2007)	60%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%

2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Clarify "initial IFSP meeting" for purposes of 45-day timeline.	February 2006	DES/AzEIP Staff
Provide technical assistance to agencies on the 45-day timeline, including policy and procedures, through monitoring activities; Quarterly Regional meetings, and focused technical assistance.	October 2006 and ongoing	CQI Coordinators, CSPD Coordinator, TA Specialist and TAMS
Monitor through continuous monitoring and quality improvement system (see Indicator #9) to ensure implementation of policies and procedures.	March 2006 and ongoing	CQI Coordinators, TA and Monitoring Specialist, CSPD Coordinator
Update IFSP form and related procedures, as needed, to align with SPP indicators.		
Revise IFSP to: ● clarify "Start Date" as "Planned Start Date"; ● document dissemination of family survey annually.	January 2006 – March 2006	CQI Coordinators, CSPD Coordinator, Technical Assistance & Monitoring Specialist
Disseminate revised IFSP form with guidance.	March 2006	CQI Coordinators, Technical Assistance & Monitoring Specialists, CSPD Coordinator
Update and Expand Technical Assistance and Training System		
Support and expand TA & Monitoring Specialists statewide.	January 2006 and ongoing	Executive Director, CQI Coordinators, TA Specialist, CSPD Coordinator
Establish TA Cadre to support providers in areas of focused priorities.	January 2006 and ongoing	CQI Coordinators, Technical Assistance & Monitoring Specialists
Continue implementation of and identify additional methods of providing technical assistance.	December 2005 and ongoing	CQI Coordinators, Technical Assistance & Monitoring Specialists
Provide technical assistance and/or training to programs regarding: ● revisions to IFSP form, including determining and documenting the Planned Start Date in the IFSP; ● accessing and documenting timely services; ● team-based service delivery model; ● implementation of the NCSEAM survey for families; ● service coordination documentation for required activities.	March 2006 and ongoing	CQI Coordinators, Technical Assistance & Monitoring Specialists, TA Cadre
Undertake focused monitoring, as appropriate, and implement corrective action/program improvement plans to improve 45-day timeline.	January 2006 and ongoing	CQI Coordinators, TA and Monitoring Specialist, and TA Specialist

Focus on improving timeliness, reliability, and validity of IPP data from all contractors.		
Provide detailed feedback and guidance on automated data to each contractor on a monthly basis.	August 2006 – June 2007	Technical Assistance Specialist, CQI Coordinators, and TA and Monitoring Specialists
Provide detailed feedback and guidance on automated data to each contractor as needed, but at least quarterly.	July 2006 and ongoing	Technical Assistance Specialist, CQI Coordinators, and TA and Monitoring Specialists
Provide targeted TA for Maricopa County contractors implementing the IPP and service coordination agencies, focusing on improving coordination across programs during IPP process to improve IFSP timeline compliance.	April 2006 – December 2007 and ongoing as needed	Technical Assistance Specialist, CQI Coordinators, and TA and Monitoring Specialists
Incorporated herein are the Improvement Activities from: ● Indicator #1 concerning (i) evaluating system capacity issues; (ii) identifying and implementing a recruitment and retention plan, and (iii) implementing and maintaining of a team-based model. ● Indicator # 9 regarding the CQIMS. ● Indicator #14 regarding revising data system to incorporate required data elements.	December 2005 and ongoing	

Indicator 8

Overview of the State Performance Plan Development: Described in Indicator 1.

Monitoring Priority: Effective General Supervision / Effective Transition

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Indicator – 8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:

A. IFSPs with transition steps and services;

B. Notification to LEA, if child potentially eligible for Part B; and

C. Transition conference, if child potentially eligible for Part B)

Measurement:

A. Percent = # of children exiting Part C who have an IFSP with transition steps and services divided by # of children exiting Part C times 100.

B. Percent = # of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred divided by the # of children exiting Part C who were potentially eligible for Part B times 100.

C. Percent = # of children exiting Part C and potentially eligible for Part B where the transition conference occurred divided by the # of children exiting Part C who were potentially eligible for Part B times 100.

Overview of Issue/Description of System or Process:

A. Throughout a child's eligibility with AzEIP, families are informed that supports and services are provided until their child's third birthday. AzEIP's current IFSP form contains the required steps for transitioning children and their families on the Transition Plan and Timeline pages. The service coordinator is charged with facilitating the transition and documenting the steps as they are completed. Technical assistance and training has been provided throughout the past year to inform service coordinators of the requirement to document all steps.

B. For children who are potentially eligible for Part B services, DES/AzEIP and the Arizona Department of Education adopted policies and procedures to ensure a smooth transition from Part C programs to Part B preschool programs and to identify the responsibilities of each agency during the transition process. These procedures are memorialized in an Intergovernmental Agreement (Transition IGA) and apply to all AzEIP service providing agencies. The Transition IGA, effective November 2004, outlines responsibilities of Public Education Agencies (PEAs) and early intervention providers, including the notification of PEA at two specific times during the year of children potentially eligible for Part B. During FY 2004, DES/AzEIP used the data from this biannual notification of all children potentially eligible for Part B as its baseline data.

During the 2005-2006 reporting period, the measurement for this item was changed to align with the new IFSP form and the provision of the Transition IGA requiring notification to the LEA of a transition conference for children who may be eligible for Part B. DES/AzEIP revised its Child File Audit Tool and used data collected from Cycle 3 monitoring as new baseline data in FY 2005.

The measurement captures individual data on children for whom a transition conference is planned with the LEA to discuss options for Part B.

C. The service coordinator facilitates a transition conference with the child's parent(s), a provider from the IFSP team, and a PEA representative, when the child is between two years six months and two years nine months of age. The service coordinator is required to document the transition conference utilizing a Transition Conference Summary, which contains the date of the transition meeting. AzEIP uses monitoring data from on-site monitoring visits for this sub-indicator, reviewing child files to determine whether the transition conference occurred within required timelines.

Baseline Data for FFY 2004 (2004-2005):

A. IFSPs with transition steps and services

File Reviews	# of Files Reviewed	# Compliant	% Compliant
Site visits	67	36	54%

B. Notification

33 of 34 service coordination providing agencies/programs provided notification to the LEA of all children potentially eligible for Part B = 97% compliance.

C. Transition conference

File Reviews	# of Files Reviewed	# Compliant	% Compliant
Site visits	51	24	47%

Discussion of Baseline Data:

Each child's IFSP includes a Transition Plan and Timelines section outlining the specific transition steps and services required. Programs were determined compliant when the IFSP included documentation of the assigned responsibilities for transition and the dates completed. While service coordinators reported that they facilitated the steps throughout the transition process, including the transition conference, there was inconsistent documentation on the IFSP itself. The lack of documentation appeared to be a primary contributing factor to the low compliance rating.

The revised Transition IGA went into effect in November 2004 and statewide training was provided to all service coordinators across the AzEIP service providing agencies in the following months. The Transition IGA requires the service coordinator to complete a "Transition Conference Planning" form at the time of the transition conference, identifying the steps, responsible person(s), and timelines to ensure the child transitions at age three. While the Program Self-Assessments and Cycle 1 monitoring visits occurred prior to the Transition IGA, Cycle 2 visits occurred afterwards. Those Cycle 2 programs monitored in early summer 2005, showed significantly higher compliance with documenting transition steps and services and the transition conference date. For example, of the 20 files reviewed, 14 (70%) included documentation of transition steps and services. Of 18 files reviewed, 14 (77%) included documentation that the transition conferences were held between 2.6 – 2.9. The improvement in the documentation may be directly related to the training on the Transition IGA and the subsequent implementation of the new forms and requirements.

FFY	Measurable and Rigorous Target
2005 **(2005-2006)**	**100%**
2006 **(2006-2007)**	**100%**
2007 **(2007-2008)**	**100%**
2008 **(2008-2009)**	**100%**
2009 **(2009-2010)**	**100%**
2010 **(2010-2011)**	**100%**

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Update IFSP form and related procedures, as needed, to align with SPP indicators		
Revise IFSP and IFSP Guidance document to delineate transition steps and services.	March - May 2006	CQI Coordinators, CSPD Coordinator, Technical Assistance & Monitoring Specialist
Disseminate revised IFSP form with guidance document.	July 2006	CQI Coordinators, Technical Assistance & Monitoring Specialists, CSPD Coordinator
Provide technical assistance related to required documentation of transition information on the IFSP and related documents.	July - September 2006	CQI Coordinators, Technical Assistance & Monitoring Specialists
Prepare and disseminate written technical assistance (such as a Technical Assistance Bulletin) on transition policy and procedures.	October 2007	TAMS, CQI Coordinators and CSPD Coordinator
Revise monitoring tools to collect: - reason data when transition conference not held as required. - date when conference held.	February – March 2007	TAMS and CQI Coordinators
Provide technical assistance to assist local communities in preparing procedures to ensure	September 2007 and ongoing	TAMS, CQI Coordinators and CSPD Coordinator

smooth transition and to resolve challenges.		
Focused technical assistance requiring programs to drill down issues when non-compliance identified.	June 2007	CQI Coordinators and TAMS
Revise, if needed, Transition IGA to align with IDEA 2004 when regulations are available.	December 2007	CSPD Coordinator, CQI Coordinators
Continue annual cross-training on the Transition IGA in collaboration with ADE.	November 2006 and annually through 2010	TA & Monitoring Specialists, CSPD Coordinator
Incorporated herein by reference are the applicable Improvement Activities from Indicator #9 related to revisions of monitoring tools and procedures.		
Prepare and disseminate written technical assistance (such as a Technical Assistance Bulletin) on transition policy and procedures.	October 2007	CSPD Coordinator, CQI Coordinators; TA & Monitoring Specialists
Revise monitoring tools to collect: - reason data when transition conference not held as required. - date when conference held.	February – March 2007	CSPD Coordinator, CQI Coordinators; TA & Monitoring Specialists
Provide technical assistance to assist local communities in preparing procedures to ensure smooth transition and to resolve challenges.	September 2007 and ongoing.	CSPD Coordinator, CQI Coordinators TA & Monitoring Specialists
Focused technical assistance requiring programs to drill-down issues when non-compliance identified.	June 2007	CQI Coordinator, ADE, Technical Assistance and Monitoring Specialists

Indicator 9

Overview of the State Performance Plan Development: Described in Indicator 1.

Monitoring Priority: Effective General Supervision / General Supervision

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Indicator – 9. General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification

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Measurement:

A Percent of noncompliance corrected within one year of identification:

   a. # of findings of noncompliance.
   b. # of corrections completed as soon as possible but in no case later than one year from identification.

   Percent = [(b) divided by (a)] times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

Overview of Issue/Description of System or Process:

Arizona's Continuous Monitoring and Quality Improvement System (CMQIS)

Overview
DES/AzEIP administers a multi-faceted Continuous Monitoring and Quality Improvement System (CMQIS), which includes: (1) family surveys and interviews; (2) Program Self-Assessments (PSA); (3) periodic desk audits; (4) cyclical on-site monitoring reviews and/or focused monitoring reviews; and (5) agency level reviews. The system is on a five-year monitoring cycle.   The following describes each facet of the system:

1) Family Surveys
   ▪ Distributed to families at their initial and annual Individualized Family Service Plan meetings
   ▪ DES/AzEIP provides a summary of the family survey results to programs.
   ▪ The programs reflect the survey results in the annual Program Self-Assessment
   ▪ Areas of non-compliance are addressed in the corrective action plan and used to target areas for improvement and technical assistance

2) Program Self-Assessment
   ▪ Annually, each agency's service coordination unit(s) submit the AzEIP Program Self-Assessment to their contracting agency and/or to DES/AzEIP.
   ▪ The PSA spans the cluster areas of General Supervision, Child Find, Early Intervention in Natural Environments, and Transition.
   ▪ This self-assessment is based on data and documents program performance related to AzEIP policies and procedures and IDEA, Part C requirements, using tools including the Child File Audit, the Personnel File Audit, the Physical Setup Checklist, and the PSA itself.
   ▪ Based on data gathered through the PSA, agencies are required to develop a Corrective Action Plan (CAP) for any areas of non-compliance.

3) Desk Audits
  ▪ DES/AzEIP conducts a review of all existing data submitted to DES/AzEIP by the AzEIP participating agencies (including DES/AzEIP contractors) and analyzes the data to identify areas of strength and areas in need of correction/improvement planning.
  ▪ If areas of non-compliance are identified through the Desk Audit process, DES/AzEIP ensures the areas on non-compliance are addressed through the programs existing Corrective Action Plan, if the non-compliance is not already included. Focused on-site monitoring visits may also be conducted.

4) Site Reviews
  ▪ DES/AzEIP established a 5 year monitoring cycle for conducting site reviews based on population and risk factors. Maricopa County, which consists of 60% of the population in the State and had known system concerns and compliance issues, was chosen for Cycle 1. Cycle 2, 3, 4, and 5 were chosen by risk factors, and then grouped geographically. Although each cycle receives a site visit every five years, DES/AzEIP may conduct a site review outside of the cycle when serious issues of non-compliance are identified through complaints, desk audits, PSA and/or when issues of non-compliance are not corrected.
  ▪ Site visits are a synthesis and verification of Program Self-Assessment, desk audits, and child, personnel, and financial file reviews.
  ▪ Prior to a site visit, DES/AzEIP reviews:
      - Agency/program policies and procedures,
      - Financial information,
      - ACTS/MIS data,
      - Family Survey data,
      - Program Self-Assessment data, and
      - Dispute resolution information
  ▪ The site review results in a summary report, and if needed, a corrective action plan to ensure compliance with IDEA, Part C and AzEIP policies and procedures, as well as, improvement of program practice, within one year of the monitoring visit.

5) Agency level
  The Intergovernmental Agreement involving AzEIP participating agencies required under A.R.S. § 8-652 provides corrective action according to its terms, relevant law, and policies and procedures, to address non-compliance. AzEIP participating agencies that provide early intervention services also report monthly data to DES/AzEIP on: timeline compliance, services identified on the IFSP and services provided, and fiscal resource information.

Identification of Non-Compliance
When areas of non-compliance are identified, programs are required to complete and submit a Corrective Action Plan (CAP). Components of the CAP include:
  • Analysis of the "root cause" of non-compliance
  • Outline of targets (proposed evidence of change)
  • Activities to achieve results
  • Projected timelines (one year or less)
  • Persons responsible
  • Available resources
  • Technical assistance needs to correct non-compliance

Follow up to CAP includes:
  • Submission to, and approval by, the state agency/program representative and DES/AzEIP;
  • Once approved, a program submits, as required, status updates at 45 days, 6 months, and annually, to its contracted agency and/or DES/AzEIP;

- If 6 month progress report does not show a program progressing towards compliance, the regional Technical Assistance and Monitoring Specialist (TAMS) assigned to the program will meet with the program to further investigate root causes of the non-compliance. The TAMS will provide identified technical assistance directly or access it through other available resources.
- DES/AzEIP notifies the program, in writing, three months prior to their one year correction period, that their program will be contacted to schedule a site visit to verify correction of non-compliance;
- If DES/AzEIP confirms the program has reached compliance for all items in the CAP, AzEIP issues a close-out letter to the program.

Technical Assistance System

Arizona's CQIMS is directly linked to its Technical Assistance (TA) System, which responds to system needs identified through the CQIMS, the Comprehensive System of Personnel Development (CSPD), and identified State initiatives. Technical assistance is provided in a variety of ways to ensure that the assimilation and application of information is available to the early intervention community, including dissemination through listservs, and posting TA bulletins on the AzEIP website. The overall goal of the TA system is to provide programs with the opportunity to enhance their confidence and competence in providing early intervention supports and services in accordance with IDEA, Part C, and AzEIP policies and procedures. TAMS have been designated to support and provide technical assistance to early intervention programs in their regions throughout the monitoring process. The TAMS will aid in the program's development of their Program Self Assessments, preparation for on-site monitoring visits, development and implementation of corrective action plans, and the provision of identified technical assistance and training.   The regional TAMS have access to a breadth of expertise through the DES/AzEIP staff and other TAMS to effectively support programs to improve performance and compliance. The TAMS also have access to the TA Cadre for TA and training in identified priority areas and facilitating the integration of that TA information into practice.

Corrective Measures and Remedies-

AzEIP ensures the enforcement of corrective measures and remedies in conjunction with the monitoring system, including:
   A. required submission of additional documentation and/or increased frequency of reporting concerning area(s) of non-compliance and strategies to improve compliance;
   B. focused monitoring visits to review files, meet with staff, identify strategies for improvement, and prepare a plan to address areas of non-compliance;
   C. implementation of a corrective action plan, including timelines for implementation;
   D. revising contract terms and provisions when necessary, and with appropriate notice;
   E. adjustment or withholding of whole or partial payment until satisfactory resolution of default/non-compliance;
   F. suspension of all or part of the contract; and
   G. termination of the contract in whole or in part.

Baseline Data for FFY 2005 (2005-2006):

2004-2005 was the first year the Arizona CMQIS was implemented, therefore Arizona does not have baseline data for previous fiscal years. Every agency or contracted program providing service coordination participated in the monitoring process through submission of program self-assessments, and for Cycles 1 and 2, on site reviews. Programs submitted their close-out CAP data and annual PSAs November 2005 through February 2006. The data was reviewed and analyzed, the number of corrections complied, and the data reported in the March 2006 Compliance Agreement Quarterly Report. This baseline data is set out below as well as reported in DES/AzEIP APR for FFY 2005.

46% of noncompliance corrected within one year of identification:

   a. # of findings of noncompliance identified 2004-2005 =434
   b. # of corrections completed as soon as possible, but in no case later than one year from identification 2005-2006 = 201
Percent = [201 divided by 434] times 100 = 46%

The baseline data for this indicator is based on data collected during 2005-2006 from
- Cycle 1 and Cycle 2 Site Reviews
- Cycle 3, 4, and 5 Program Self-Assessment
- State Complaint Log
- State's Data System.

Taken together, these data sources represent 31/31 service coordination programs in the State. The correction data was submitted by each program in accordance with their Corrective Action Plan. For many of the findings of non-compliance, this required two Child File Audits per service coordinator, with the resulting data submitted to DES/AzEIP for review. If the data submitted through the child file audits was inconsistent with data from the State's data system or complaints received by AzEIP, the AzEIP Continuous Quality Improvement Coordinator (CQI) and the Technical Assistance and Monitoring Specialist (TAMS) visited the program to review additional files, provide TA, and to identify new activities for improvement, if needed.

Table A is a breakdown of the data by the Monitoring Priority Areas (SPP Indicators 1, 7, 8,) and then by Monitoring Non-Priority Areas, which include the additional federal requirements. Arizona has clustered the non-priority areas by Child Find, IFSP required components, Service Coordination, and Procedural Safeguards.

Table A			
31 programs	# of Identified Non-compliance	# Corrected	% Corrected < 1 year
Monitoring Priority Areas: ▪ 45-days ▪ Timely Services ▪ Transition	58	19	33%
			Not Corrected: 45-day: 11/11 programs Timely Services: 15/29 programs Transition: 13/29 programs See analysis below
Monitoring Non-priority Areas ▪ Child Find ▪ IFSP ▪ Service Coordination ▪ Procedural Safeguards	406	195	48%

Complaints	N/A	N/A	N/A
Total	464	214	46%

Analysis of Table A:

Monitoring Priority Areas

The data indicates the success the State has experienced in its ability to identify and correct noncompliance. It also reflects the challenge the State has in meeting the 45-day timeline, timely provision of services, and to some extent ensuring each child received timely transition planning. A thorough discussion of the State's improvement activities and strategies related to the monitoring priority areas can be found in Indicators 1, 7, and 8.

Monitoring Non-Priority Areas

A drill-down of the outstanding non-compliance of the monitoring non-priority areas by program, county, and statewide revealed that most programs had made improvements in ensuring evaluations were completed by a multi-disciplinary team, documenting service coordination activities, and providing procedural safeguards at the appropriate times.   However, statewide programs continue to be noncompliant in Child Find related to evaluations not including all areas of development; most specifically vision and hearing. While many programs made significant correction to include the required components of the IFSP, ensuring that the child's present levels of development included all areas of development; specifically vision and hearing, writing functional outcomes and ensuring the frequency, intensity, start and end of each service were included the IFSP, seemed to be systemic statewide issues.

FFY	Measurable and Rigorous Target
2005 **(2005-2006)**	**25%**
2006 **(2006-2007)**	**50%**
2007 **(2007-2008)**	**100%**
2008 **(2008-2009)**	**100%**
2009 **(2009-2010)**	**100%**
2010 **(2010-2011)**	**100%**

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Revise, disseminate, and implement the Interagency Agreements with the AzEIP participating Agencies to address general supervision requirements.	April 30, 2006	DES/AzEIP, the State Interagency Team, and the Attorney General's Office.
Implement the monitoring system in accordance with the cycles.		
Implement the Program Self-Assessment with Service Coordination providers statewide.	In accordance with established monitoring cycles	CQI Coordinators, TA and Monitoring Specialists, Local Program Coordinators (LPCs) and agency partners
Implement the "desk audit" process: analyze available data from all sources, including comparisons over time, and utilize analysis to identify issues of compliance and non compliance.	In accordance with established monitoring cycles	CQI Coordinators, TA and Monitoring Specialists, TA Specialist
Implement the site review process with Service Coordination providers statewide.	In accordance with established monitoring cycles	CQI Coordinators, TA and Monitoring Specialists, and agency partners
Review and approve corrective action plans.	In accordance with established monitoring cycles	CQI Coordinators, TA and Monitoring Specialists, and agency partners
Monitor progress on corrective action plans.	In accordance with established monitoring cycles	CQI Coordinators, TA and Monitoring Specialists, and agency partners
Review and approve "completion and close-out" of corrective action plans.	February 2006 and on-going	CQI Coordinators, TA and Monitoring Specialists,
Implement intensified corrective action plan with specific technical assistance for non-compliance items not resolved with one year.	February 2006 and ongoing, as needed	CQI Coordinators, TA monitoring specialists
Implement appropriate sanctions or enforcement activities for failure to complete corrective action items.	February 2007 and on-going	DES/AzEIP staff and agency partners
Explore incentives for programs with close-outs in 9 months or less.	February 2007	CQI Coordinators and agency partners
Review and revise polices, procedures, and/or tools of the CQIMS to ensure alignment with new Federal and/or State policies and procedures and SPP requirements.	March 2006 and annually thereafter until 2010	CQI Coordinators, TA Specialist
Realign monitoring cycle with regions established under the AzEIP system redesign.	January 2008	DES/AzEIP staff
Implement the NCSEAM family survey and incorporate into the CQIMS.		
Analyze family survey results, compare to baseline data, and review trends. Utilize results to inform monitoring and corrective action.	July 2007 & annually through 2010	CQI Coordinators, and agency partners

Provide findings from family surveys to AzEIP service providing agencies that are responsible for sharing with appropriate providers/contractors.	July 2007 and annually thereafter until 2010	CQI Coordinators and agency partners
Update IFSP form to document dissemination of family survey annually.	January 2006 – March 2006	CQI Coordinators, CSPD Coordinator, Technical Assistance & Monitoring Specialist
Incorporated herein are the improvement activities from Indicator 14 regarding management information systems.		
Incorporated herein are the improvement activities from Indicator 1 regarding implementation of the team-based service delivery model.		
Incorporated herein are the improvement activities from Indicator 7 regarding revision to the IFSP form and policies.		

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2006:

Improvement Activities	Timelines	Resources
Realign monitoring cycle with regions established under the AzEIP system redesign. Justification: Activity is not within the reporting period. Timeline revision requested to align with delays in Redesign timelines	December 2008	CQI Coordinators

Indicator 10

Overview of the State Performance Plan Development: Described in Indicator 1.

Monitoring Priority: Effective General Supervision / General Supervision

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Indicator – 10. Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

Measurement: Percent = (1.1(b) + 1.1(c)) divided by (1.1) times 100.

Overview of Issue/Description of System or Process:

DES/AzEIP ensures that any individual or organization may file a written, signed complaint with DES/AzEIP alleging any violation of the requirements of IDEA, Part C. The information describing the procedures to resolve disputes, including filing a complaint and requesting mediation and a due process hearing, are contained in the Procedural Safeguards for Families handbook (the "Handbook"). DES/AzEIP disseminates Handbooks to all agencies and programs that provide service coordination from its office and through the AzEIP Local Program Coordinators. The Handbook is also available at the parent training centers and the information is available on the DES/AzEIP website.

Families are provided the Handbook upon request and in conjunction with the following events: initial evaluation and assessment; eligibility determination; prior written notice; and six month, annual or other IFSP reviews. The Handbook is printed in English and Spanish. Service Coordinators are responsible for providing families with these booklets and explaining the information in the booklet to families. Families are informed that they may file a formal complaint and use the informal complaint resolution process at the same time. If appropriate, Service Coordinators may help families file a formal complaint. Service Coordinators, as well as, all providers of early intervention services, are required to attend AzEIP's Standards of Practice training entitled Policies and Professionalism, wherein information concerning families' procedural safeguards is discussed.

To file a system complaint, an individual or organization must send a written, signed complaint to the Executive Director of DES/AzEIP, include a statement that the State has violated a requirement or regulation of IDEA, Part C, and provide the facts of the situation. The Executive Director or designee reviews the complaint to determine its validity for follow-up. A complaint is judged valid if the alleged violation occurred not more than 1 year before the date the complaint was received, unless (a) the alleged violation continues for the child or other children, or (b) the complainant is requesting reimbursement or corrective action for a violation that occurred not more than 3 years before the complaint was received. The Executive Director or designee reviews all relevant information and conducts an independent on-site investigation, if necessary, and gives the complainant the opportunity to submit additional information, either orally or in writing, about the allegations in the complaint.

The Executive Director or designee makes an independent determination as to whether the agency is violating a requirement or regulation of IDEA, Part C. The Executive Director of DES/AzEIP sends a written decision to all parties within 60 days from the date of receipt of the complaint. The decision addresses each allegation in the complaint and includes the findings of fact and conclusions and the reasons for the final decision. When appropriate, DES/AzEIP's decision also includes procedures for technical assistance, negotiation, and corrective action plans for bringing an agency into compliance. In resolving a complaint in which it finds a failure to provide appropriate services, DES/AzEIP, pursuant to its general supervisory authority under IDEA, Part C addresses:

(1) how it will remediate the denial of those services, including, as appropriate, the awarding of monetary reimbursement or other corrective action appropriate to the needs of the child and the child's family; and

(2) appropriate future provision of services for all infant and toddlers with disabilities and their families.

All investigations and resolutions are completed within 60 days of original receipt of the complaint. An extension may be granted in extraordinary cases only where the nature or severity of allegations warrants further investigation. If a written complaint is received that is also the subject of a due process hearing, or contains multiple issues, of which one or more are part of that hearing, DES/AzEIP sets aside any part of the complaint that is being addressed in the due process hearing until the conclusion of the hearing. However, any issue in the complaint that is not a part of the due process action is resolved within the 60-calendar day timeline using the procedure described above. If an issue is raised in a complaint that has previously been decided in a due process hearing involving the same parties, the hearing decision is binding, and DES/AzEIP informs the complainant to that effect.

If an AzEIP participating agency utilizes its own process for dispute resolution, it ensures through written agreement that its policies and procedures are consistent with the rules and regulations of 34 CFR 303.419-425 and DES/AzEIP policies. If the child who is the subject of the dispute is also eligible for another Federal or State program, which has its own dispute resolution process, DES/AzEIP and the other administrative entity will collaborate to determine jurisdiction based on the nature of the complaint. For all complaints alleging failure to implement AzEIP according to IDEA, Part C, DES/AzEIP will facilitate or designate an AzEIP participating agency to facilitate the dispute resolution process according to IDEA, Part C. If the complaint involves an application for initial services, the child must receive those services that are not in dispute. Complaints alleging a failure by an AzEIP participating agency or contractor to implement a due process hearing decision must be resolved by DES/AzEIP.

DES/AzEIP monitors the provision of procedural safeguards to families through its Continuous Monitoring and Quality Improvement System, through agencies' and programs' self-assessment, on-site monitoring visits, and response to family complaints. Family interview questions also gather information telephonically during the on-site visits about whether families understand their rights in the early intervention program. The NCSEAMS family survey additionally asks parents about whether they know their rights in the early intervention system.

DES/AzEIP logs formal and informal complaints to ensure the information is captured accurately and that all complaints are resolved in a timely manner. DES/AzEIP monitors the trends and themes from both its formal and informal complaint log and compares with its monitoring data. Technical assistance and/or focused monitoring are undertaken as appropriate and corrective action plans prepared.

Baseline Data for FFY 2004 (2004-2005):

  100%

Discussion of Baseline Data:

DES/AzEIP received four formal complaints, one in which a report with no findings was issued within the 60 day time frame. The three remaining complaints were resolved informally and subsequently withdrawn within the 60 day timeframe.

FFY	Measurable and Rigorous Target
2005 **(2005-2006)**	**100%**
2006 **(2006-2007)**	**100%**
2007 **(2007-2008)**	**100%**
2008 **(2008-2009)**	**100%**
2009 **(2009-2010)**	**100%**
2010 **(2010-2011)**	**100%**

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
DES/AzEIP Continuous Quality Improvement Coordinators will utilize the formal Complaint Log to track dispute resolutions carried out by an AzEIP service providing agency, to ensure complaints, findings, and timelines adhere to AzEIP Policies and Procedures and IDEA, Part C.	January 2007	CQI Coordinators
Continued implementation of the AzEIP Standards of Practice to support understanding of how and when to provide families with their procedural safeguards.	December 2005 with annual trainings	CSPD Coordinator, ASDTP Staff
Conduct semi-annual reviews of the complaint logs to assist in identifying and resolving systemic issues.	December 2005 and every six months through 2010	CQI Coordinators, Technical Assistance & Monitoring Specialists
Implement a reminder system to alert the complaint investigator a week prior to a complaint due date that the 60- day timeline is about to expire.	January 2006	CQI Coordinators
Incorporated herein are the improvement activities from Indicator #9 regarding (i) implementation of the NCSEAM family survey to collect data about family rights; (ii) establishment or revision of policies and procedures; (iii) implementation of the monitoring system; and (iv) reviewing and, if needed, revising the polices, procedures, and/or		

tools of the CMQIS to ensure alignment with new Federal and/or State policies and procedures.		

Indicator 11

Overview of the State Performance Plan Development: Described in Indicator 1.

Monitoring Priority: Effective General Supervision / General Supervision

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Indicator – 11.   Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.

Measurement: Percent $= (3.2(a) + 3.2(b))$ divided by (3.2) times 100.

Overview of Issue/Description of System or Process:

The overview of how and when families receive information about their procedural safeguards concerning due process hearings is found in the Overview for Indicator GS 10, along with the mechanisms DES/AzEIP has in place to monitor and correct non-compliance areas. All due process hearings are carried out at a time and place that is reasonably convenient to the family. A hearing may be initiated on any matters related to AzEIP's proposal or refusal to initiate or change the: (a) identification of the child; (b) evaluation of the child; (c) placement of the child; or (d) provision of early intervention services to the child and family.

To initiate a due process hearing, the following steps must be taken:

  A. A written request must be filed with the appropriate participating agency representative or with the Executive Director of DES/AzEIP.
  B. The appropriate AzEIP participating agency representative, or the Executive Director of DES/AzEIP or a designee, appoints a trained, impartial hearing officer.
  C. The hearing officer:
    (1) has knowledge about the provisions of IDEA, Part C and the needs of, and services available for, eligible children and their families;
    (2) is not employed by the agency providing early intervention services to the child and family, except when a person who otherwise qualifies to conduct the hearing is paid by the agency solely to serve as a hearing officer; and
    (3) does not have a personal or professional interest that would conflict with his or her objectivity in implementing the process.
  D. The hearing officer:
    (1) listens to the presentation of relevant viewpoints about the dispute;
    (2) examines all information relevant to the issues;
    (3) seeks a timely resolution; and
    (4) provides a record of the proceedings including a written decision.
  E. The due process hearing procedure is completed and a written decision mailed to each of the parties within 30 days after the appropriate AzEIP participating agency or DES/AzEIP has received the request.
  F. Unless agreed upon by the family and the agency, there is no change made in the services received by the child during the pendency of the due process hearing prior to a final order by a Hearing Officer.
  G. The decision made in a hearing is final.

An AzEIP participating agency may follow its own due process hearing procedures, as long as they are consistent with the rules and regulations of 34 CFR §§303.419-425 and DES/AzEIP policies. If the child who is the subject of the hearing is also eligible for another Federal or State program, which has its own due process hearing procedures, DES/AzEIP and the other administrative entity will

collaborate to determine jurisdiction based on the nature of the complaint. For all complaints alleging failure to comply with IDEA, Part C, DES/AzEIP will facilitate or designate an AzEIP participating agency to arrange the due process hearing according to IDEA, Part C. When an AzEIP participating agency uses its own process for a due process hearing, that agency must inform the Executive Director of DES/AzEIP within two days of receiving the complaint. The agency must then keep DES/AzEIP apprised of the progress of the dispute. If the AzEIP participating agency does not have its own procedures for due process hearings, or requires DES/AzEIP to facilitate the due process hearing for any reason, then the participating agency must inform DES/AzEIP within 24 hours of receiving the request.

Baseline Data for FFY 2004 (2004-2005):

Full compliance.

Discussion of Baseline Data:

One due process hearing request was filed and withdrawn within the 30 day timeframe as an informal resolution was reached between the parties involved.

FFY	Measurable and Rigorous Target
2005 **(2005-2006)**	**100%**
2006 **(2006-2007)**	**100%**
2007 **(2007-2008)**	**100%**
2008 **(2008-2009)**	**100%**
2009 **(2009-2010)**	**100%**
2010 **(2010-2011)**	**100%**

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Continued implementation of the AzEIP Standards of Practice to support understanding of how and when to provide families with their procedural safeguards.	December 2005 with ongoing trainings	CSPD Coordinator, ASDTP Staff

Incorporated herein are the improvement activities from Indicator #9 regarding (i) implementation of the NCSEAM family survey to collect data about family rights; (ii) establishment or revision of policies and procedures; (iii) implementation of the monitoring system; and (iv) reviewing and, if needed, revising the polices, procedures, and/or tools of the CMQIS to ensure alignment with new Federal and/or State policies and procedures.		

Indicator 12 – Not Applicable

Indicator 13

Overview of the State Performance Plan Development: Described in Indicator 1.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority:

Indicator – 13. Percent of mediations held that resulted in mediation agreements.

> **Measurement:** Percent = (2.1(a)(i) + 2.1(b)(i)) divided by (2.1) times 100.

Overview of Issue/Description of System or Process:

DES/AzEIP ensures that families receive information concerning their right to request mediation through the Families Rights Booklet. The overview of how and when families receive this information is found in the Overview for Indicator GS 10, along with the mechanisms DES/AzEIP has in place to monitor and correct non-compliance areas. Service Coordinators are trained through the AzEIP Standards of Practice, Policies and Professionalism training about a family's right to mediation under IDEA, Part C.

To initiate the mediation process, the following steps are taken:
A. A family member or agency requests mediation, in writing, to the appropriate participating agency representative or to the Executive Director of DES/AzEIP.
B. The appropriate AzEIP participating agency representative, or the Executive Director of DES/AzEIP or a designee, obtains written agreement to the mediation process by all other parties to the dispute.
C. Once agreement is obtained, the appropriate AzEIP participating agency representative or the Executive Director of DES/AzEIP or designee, appoints a qualified, impartial mediator who is trained in effective mediation techniques and knowledgeable in laws and regulations related to all aspects of early intervention services.
D. The appropriate AzEIP participating agency representative or the Executive Director of DES/AzEIP or a designee, ensures that each session of the mediation is scheduled in a timely manner and in a location convenient to all parties involved in the dispute.
E. The appropriate AzEIP participating agency representative or the Executive Director of DES/AzEIP or a designee, ensures that agreements reached by all parties through mediation will be recorded in a written mediation agreement.

When a participating agency uses its own process for mediation, that agency must inform the Executive Director of DES/AzEIP within two days of receiving the request for mediation. The agency must then keep DES/AzEIP apprised of the progress of the request. If the AzEIP participating agency does not have its own procedures for mediation, or requires DES/AzEIP to facilitate the mediation process for any reason, then the participating agency must inform DES/AzEIP within 24 hours of receiving the request. The AzEIP participating agency or DES/AzEIP bears the cost of the mediation process. While mediation is pending, unless DES/AzEIP or the AzEIP participating agency and the family of a child otherwise agree, the child must continue to receive the appropriate early intervention services currently being provided.

Baseline Data for FFY 2004 (2004-2005):

Full compliance.

Discussion of Baseline Data:

One mediation request was received and withdrawn as an informal resolution was agreed upon by all parties.

Improvement Activities/Timelines/Resources: NA

SPP /APR Attachment 1 (Form)

Report of Dispute Resolution Under Part C of the Individuals with Disabilities Education Act Complaints, Mediations, Resolution Sessions, and Due Process Hearings

SECTION A: Signed, written complaints	
(1) Signed, written complaints total	4
(1.1) Complaints with reports issued	1
(a) Reports with findings	0
(b) Reports within timeline	1
(c) Reports within extended timelines	
(1.2) Complaints withdrawn or dismissed	3
(1.3) Complaints pending	
(a) Complaints pending a due process hearing	

SECTION B: Mediation requests	
(2) Mediation requests total	1
(2.1) Mediations	
(a) Mediations related to due process	1
(i) Mediation agreements	
(b) Mediations not related to due process	
(i) Mediation agreements	
(2.2) Mediations not held (including pending)	1

SECTION C: Hearing requests	
(3) Hearing requests total	1
(3.1) Resolution sessions	
(a) Settlement agreements	
(3.2) Hearings (fully adjudicated)	
(a) Decisions within timeline **SELECT** timeline used {30 day/Part C 45 day/Part B 45 day}	
(b) Decisions within extended timeline	
(3.3) Resolved without a hearing	1

Indicator 14

Overview of the State Performance Plan Development: Described in Indicator 1.

Monitoring Priority: Effective General Supervision / General Supervision

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Indicator – 14. State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

Measurement: State reported data, including 618 data, State performance plan, and annual performance reports, are:
a.   Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and
b.   Accurate (describe mechanisms for ensuring accuracy).

Overview of Issue/Description of System or Process:

Required data is collected through a variety of data systems utilized by participating State agencies and contracted programs. DES/AzEIP defines the data requirements, definitions, and values. All AzEIP State participating agencies and contractors are required to submit data to DES/AzEIP on a monthly basis.

After receipt of data by DES/AzEIP, records are combined, unduplicated, and run through a variety of programs to clean data, and perform edit checks and validations.

Baseline Data for FFY 2004 (2004-2005):

A. Timely submission of data to OSEP:
All 618 reports and annual performance reports for 2004-2005 were submitted in a timely manner.

B. Accuracy of data:

DES/AzEIP utilizes collected data to produce a variety of management reports. These reports are reviewed and analyzed to assess data collection procedures and practices and to determine whether data was accurate and timely. Technical assistance, including provision of error reports, is provided to agencies and contractors as needed.

Site monitoring of early intervention programs includes comparing data recorded in a child's paper file with data recorded in the electronic record.

Discussion of Baseline Data:

A. AzEIP service providing agencies (DDD, ADHS, and ASDB) and contractors submit child data to DES/AzEIP utilizing AzEIP's file layout in order to prepare the 618 data reports. All agencies are currently complying with the request in a timely manner.

Throughout the reporting period, the DES/AzEIP data manager held meetings with the data managers from the AzEIP service providing agencies to discuss the data requirements. These discussions included review and definition of data elements required, and procedures for transmitting the data on a monthly basis. The State agencies are cooperative in the process, but the timeframe for making changes to large, agency-wide data systems is often unpredictable.

B. Crosswalks are utilized where needed between agency data systems and DES/AzEIP data requirements. These crosswalks are developed by the DES/AzEIP data manager and the agency data managers. Crosswalks are currently required between DES/AzEIP and the DDD for exit and

IFSP data. A revision of the DDD data system is in process; DES/AzEIP is working with DDD to include all AzEIP data elements and eliminate the need for crosswalks.

FFY	Measurable and Rigorous Target
2005 **(2005-2006)**	**100%**
2006 **(2006-2007)**	**100%**
2007 **(2007-2008)**	**100%**
2008 **(2008-2009)**	**100%**
2009 **(2009-2010)**	**100%**
2010 **(2010-2011)**	**100%**

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Provide technical assistance, as needed, to resolve production problems, re-test and retrain.	December 2005 and Ongoing	TA Specialist, Management Information Coordinator
Evaluate Results of ACTS system revision. • Check reports for accuracy; • Check if data is properly entered and validated; • Develop plan to correct, if needed; • Technical Assistance, if needed; • Fix production problems and retest and retain, if needed.	Ongoing	TA Specialist, Management Information Coordinator
Work with DES Division of Developmental Disabilities to revise the DDD data system to ensure inclusion of required data elements, reports and transfer of data to and from AzEIP.	July 2006 – December 2007	TA Specialist, Management Information Coordinator, DDD
New data entry screens implemented by DDD in September 2006 to collect required data elements and to provide bridge to permanent DDD data system changes.	September 2006	Technical Assistance Specialist, Management Information Coordinator, DDD (Management Information Systems) MIS staff.

Training provided to service coordinators during September through November. User manual released in November 2006.	September – November 2006	DDD Help Desk Staff, DES/AzEIP Technical Assistance specialist
Implement and monitor the revised DDD system. Provide technical assistance, as needed, to resolve production problems, re-test and retrain.	September 2006 and ongoing	TA Specialist, Management Information Coordinator, DDD
Monitoring protocol for Site Visits includes verification of individual child electronic records. Incorporated herein are the improvement activities from Indicator # 9 regarding continuing implementation of the monitoring system.	Ongoing	CQI Coordinators, TA and Monitoring Specialists, TA Specialists
Revise and expand policies and procedures related to data collection.		
Revise data collection policies and procedures, as needed, and incorporate into policy and procedure manual.	February 2006	CQI Coordinators, TA and Monitoring Specialist, CSPD Coordinator
Align policies and procedures across all agencies and providers regarding data collection.	February 2006	CQI Coordinators, CSPD Coordinator, Executive Director, State Interagency Team, and TA and Monitoring Specialist
Disseminate and implement revised policies and procedures related to data collection across the service providing agencies.	February and ongoing	CQI Coordinators, CSPD Coordinator, Executive Director, State Interagency Team, and TA Specialist
Monitor through CMQIS (see Indicator #9) to ensure implementation of policies and procedures	In accordance with monitoring cycles	CQI Coordinators, TA and Monitoring Specialist, CSPD Coordinator

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2006

Improvement Activities	Timelines	Status And Resources

Develop data handling and verification plan to ensure collection and reporting of accurate and timely data, including:
    Data collection
    Data editing and validation
    Data reporting
    System management
    Documentation
Justification- Necessary
	October 2007- June 2008	General outline developed. Specific steps in development.

Implement data handling and verification plan to ensure collection and reporting of accurate and timely data. **Justification- Necessary**	January – June 2008	Tracking log was implemented January 1, 2008.
Work with Data Accountability Center to review data collection and reporting. **Justification- TA needed.**	January-June 2008	Data Accountability Center has agreed to provide TA.